

TO THE CHAIRMAN & MEMBERS OF THE S. THOMAS RURAL DISTRICT COUNCIL,

GENTLEMEN

My second Annual Report which I have the honour to present to is that of the health & sanitary condition of your district for the year 1898.

The district comprises 109,640 acres with a population estimated to the middle of 1898 of 26,940. The population at the last census was 27,236.

As last year I have divided the whole into subdivisions which are suggested by their geography, namely the Clyst, Exe, Otter, Teign & Topsham.

#### METEOROLOGICAL CHARACTER OF THE YEAR 1898.

The winter was of a mild description there being only 6 days of bad weather in February. The first 4 months were drier than usual, 6.2 inches of rain as against 14.76 in 1897. In the last 3 months there were 10.6 against 7.5 the year before. Altogether the total rainfall was 23.75 inches, which was 8.39 less than 1897, & 6.6 less than the average for the last 8 years. The summer was remarkable for its heat & drought, but May was cold & wet.

#### VITAL STATISTICS

The number of deaths registered in the district was 425. Of these 54 were in the County Asylum in persons not belonging to the District, 3 in the Exeter Sanatorium, 1 in the Starcross Idiot Asylum, 3 deaths from injuries. To these must be added 18 occurring in the S. Thomas Union Workhouse, 2 in the Exeter Asylum & 7 in the Devon & Exeter Hospital. This gives a corrected death rate of 14.5 per 1000. This is 1.3 higher than last year.

The number of births registered is 558, giving a rate of 20.7. This is 5.3 lower than last year.

The number of deaths under one year was 66. This gives an infantile mortality of 113.2 per 1000 registered births. This is 13.2 higher than last year. There were 31 deaths from the 7 principal Zymotics giving a death rate of 1.1 as against 1.15 last year.

The proportion of Infantile deaths to the whole is 17.3 against 19.4 & of senile 42.4 against 40.4.

The figures cannot be called satisfactory as there is a rise in the death rates, both general & infantile, & there is a fall in the birth rate. The rise in the death rates is to a great extent due to the epidemic of Influenza in the winter & of Whooping cough in the Summer.

~~District rates for the different subdivisions are:-~~

The rates for the different subdivisions are:-


District	Area	Pop.	D. Rate	B. Rate	Inf. Mort.	Zym.	Phthisis	Inf. Prop.	Sen. Pro.
District			14.2	25.3	81.7	.6	.6	16.3	46.1
Clyst.	33870	7800	14.2	25.3	81.7	.6	.6	16.3	46.1
Exe.	34364	9855	13.1	16.3	140	1.1	.9	16.8	41.1
Otter.	13074	2835	17.2	19	181.8	.7	2.4	18.1	36.2
Teign.	30396	3600	16.6	23.5	178.5	3.8	.7	28.3	32.0
Topsham.	3379	2850	13.3	21.7	48.3	.0	.3	8.3	58.3

As last year the Exe has the lowest death rate but the figure is 3.4 higher. Topsham is second on the list having improved from last place, its figures being 3.1 better than before. The Teign & the Clyst are practically the same as last year but the Otter is 3.9 worse.

The birth rates are very curious. That for the Clyst is practically unaltered, in the Exe there is an extraordinary drop of 6.3 & in the Otter a still greater one of 7.6. The Teign drop is 3.3, while Topsham is only .4.

In the infantile mortality the figure is most excellent, being really phenomenal. The rate for the Clyst is good & that for the Exe is slightly above the average. Those for the Otter & Teign are enormously so. In the Teign it is to a great part due to the epidemic of Whooping Cough that occurred in the summer. In the Otter it is more difficult to find a cause. A large number of the deaths are due to Convulsions. The most common cause of this in children is improper feeding and as such these deaths ought not to occur.





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## SPECIAL DISEASE INCIDENTS.

### ZYMOTIC DISEASE.

The number of cases notified under the Infectious Diseases Notification Act is 84 against 91 last year. This gives an attack rate of 3.4 per 1000. The rates for the different districts in order of merit are, Otter 1.0, Teign 1.5, Clyst 2.3, Topsham 2.4 & the Exe 5.0. The excessive rate in the Exe is due to the outbreak of Scarlet Fever at Kenn & the fact that 10 out of the 13 cases of Erysipelas occurred here. This latter is not one of the chief Zymotic Diseases.

#### Scarlet Fever.

This has been of a much greater amount than last year, 35 cases against 19. The Exe has the greatest number, 24. Of these 3 were at Starcross, one each at Lymptone & Exminster, the remaining 19 being at Kenn. Here there had been occasional cases cropping up during the year, mostly in children. I visited the schools & found out those who were absent from school from any cause. I examined there & found 9 that had had Scarlet Fever recently. Two more cases were discovered later & 3 have occurred this year. The 3 were not in school children. The schools were closed & disinfected & thoroughly cleaned.

The 3 cases in the Clyst & the 2 in the Otter are to be taken together as they formed the same outbreak. They occurred in 2 houses but in different parishes. The houses were close together. The 3 cases in the Teign were in 2 houses. The case at Topsham was in a girl who had been sent there from an infected house in Exeter & shortly after developed the disease. No cases were fatal.

#### DIPHTHERIA.

The cases were 5 in number against 7 last year. In the house at Broadclyst in the Clyst district where there was a case notified there had been a few days before a death from Croup & I have referred this in the tables of Mortality as Diphtheria although it does not appear in the list of Notifications. In the Exe there was a case at Rewe which proved fatal & a case at Kenton, a mild case in a man. The Teign cases were a mild case in a girl at Tedburn S. Mary & a case in a visitor at Dunsford. In none of the infected houses were there any gross sanitary defects to which the outbreak might be attributed. I am not aware whether any resource to Bacteriological methods were adopted in any of the cases either for Treatment or Diagnosis. There were also deaths from Acute Laryngitis at Ashton & Exminster., both in infants. These are practically impossible to distinguish from Diphtheria without a Bacteriological examination.

#### ENTERIC FEVER.

The number of cases was 28 or half of what occurred last year. Although the reduction in number is satisfactory there is no ground for congratulation as regards the total number. The largest number of cases occurred in the Exe namely 13. Of these 13 6 occurred at Lymptone all being at the lower end of the village. The cases were spread over the months from April to October. 5 houses were infected, the secondary case in one being 4 months after the first. 3 houses had their supply from the Public Well. This was analysed (No 10). One had its own private well & the other had its supply in common with some other houses that were not infected. The sewer runs at a much lower level than the Public well is situated & I do not think that there is any danger of any pollution from this source. There were some drainage defects which were remedied. The great fault is that the well is such a distance from the houses that the closets, which are all hand flushed in the affected houses, would not be likely to be properly looked after in this regard. The other 7 cases occurred sporadically in each of the parishes of Alphington, Exminster, Starcross, Stoke Canon, Rewe & Upton Pyne. That at Rewe was contracted out of this district, water analysis (No. 13). That at Upton Pyne was a mistaken Diagnosis. The case at Exminster occurred in connection with a polluted water supply (No. 15).







The cases in the Clyst are 8 in number, 4 being at Pinhoe, 2 at Broad-clyst, & 1 each at Woodbury & Sowton. One of the cases at Pinhoe was an infant & on my visiting the premises on the day on which the case was notified the child was perfectly well, having been only ill a few days with Diarrhoea. So I think that this case may be neglected. The other 3 cases occurred in houses that were infected last year. The conditions do not differ much from those then present. There was no complaint from the Sewer emanations as last year. The analysis of 2 of the wells are (Nos. 1 & 4).

In the Teign there was one case at Christow. It is very difficult to account for these sporadic cases. Here there had been no cases of Enteric Fever for a very long time, the girl had been nowhere from home & denied ever having drunk the river water. I could get no history of anything coming from elsewhere which might have caused infection.

The 6 cases at Topsham I unhesitatingly put down to the grossly polluted water supply. It is a great pity that such a record as is possessed by Topsham for this year should be spoilt by these cases of Fever. With the present supply there is no doubt that other cases will constantly be cropping up.

#### CONTINUED FEVER.

There were 2 cases of this notified, 1 each at Woodbury & Lymington. These if they mean anything are to be taken as Enteric Fever. They both occurred with the other cases of Enteric Fever at the 2 places. At Woodbury the case of Continued Fever was the first notified, the case described as Typhoid following it. The analysis of the water is No. 9. There was a foul yard here which caused considerable of this subsoil. The Bacillus of Enteric Fever is able to live & multiply in a polluted soil if once it gets access to it.

#### ERYSIPELAS.

13 cases occurred, 10 in the Exe, 2 in the Clyst & 1 in the Otter. I am of opinion that there is no good purpose served by the inclusion of this in the list of Notifiable Diseases.

#### PUERPERAL FEVER.

One case only was notified at Woodbury. There was however one case of Peritonitis after child birth which was not notified but should be included under this head. A similar case occurred at Woodbury.

#### NON NOTIFIABLE ZYMOTIC DISEASES.

##### MEASLES.

There has been a remarkable freedom from this during the past year, there being no death from it & no appreciable outbreak.

##### WHOOPING COUGH.

There has been a great prevalence of this during the year, there being no less than 18 deaths from it. Of these 10 occurred in the Teign, 6 in the Exe, & 1 each in the Clyst & the Otter. The death in the Otter was in January being the last case of the outbreak that occurred at East Budleigh in December 1897. There was no death after this until June, when one happened in the Exe. Then followed the outbreak in the Teign, which lasted 3 months. The cases being the summer the mortality ought not to have been so great. The very great proportion of fatalities were in children of the labouring class. The spread of this disease is very hard to prevent, if not impossible, as the disease lasts for a very long time, is very infectious & is so before the Whoop occurs, when the case appears to be a simple Bronchitis. The attempt must be made to prevent such an excessive mortality & this can only be done by improving the condition, general & sanitary under which this class lives.

##### DIARRHOEA.

This is another disease which produces its mortality to a very great extent in houses that are in a deficient sanitary state. Dirty houses, polluted subsoil & bad feeding are the prime causes of this disorder. It is also dependent to a great extent on temperature. There were 10 deaths from this







They all occurred in the summer & early Autumn. ~~4~~ were in the Exe, 3 in each of the Clyst & Teign, & 1 in the Otter.

#### PHTHISIS.

Of the 33 deaths 27 were in the district & the remaining 6 in the Asylum. The number last year was 24. Topsham, which had the highest number last year is now the best, having only one death. While the Otter has the worst with a rate of 2.4. The most efficient way of dealing with this disease, either as prevention or cure is an abundance of fresh air. For this it is necessary that there should be ample light & ventilation of all rooms, especially sleeping rooms. Dampness & overcrowding are very fertile causes of this disease. Consumption is an essentially communicable disease & this should be brought to every one. All expectoration should be burnt, allowing it to dry only permits of its easier dissemination. Attention has lately been brought to bear on the danger of infection from drinking the milk & eating the meat of Tuberculous cows. This is of course especially liable to infect the intestinal tract. The infection of Phthisis is of course generally taken through the lungs. The number of deaths from all other forms of Tuberculosis, excluding Phthisis is 9. Of these 4 were due to general tuberculosis, 1 of Meningitis, 1 of peritonitis, & the other of Babes Mesenterica. The latter was in a infant of 3 months old & possibly was not tubercular. I do not know that General Tuberculosis or Meningitis can be ascribed to infection from blood, & so we are left with one case only where this may be put down to this way of infection.

#### INFLUENZA.

This was very prevalent in the earlier part of the year, 24 deaths occurring from it. It had a special incidence in the Clyst district.

#### OTHER DISEASES.

Disease of the Respiratory Organs caused 55 deaths against 57 last year. The age distribution is however widely different. This year there were only 9 under 5 years of age, while in 1897 there were 25. The deaths over 5 were in consequence 48 against 30. I think this large increase is probably due to a number of deaths here being really due to Influenza. Disease of the heart was 39 or 9 less. Injuries 15, no change. There were 23 from Cancer or 1 less. 39 from Old age or 9 more, & 17 from convulsions.

#### DISINFECTION.

There has been no change in the methods used. These ~~are~~ <sup>are</sup> by the Distribution of Carbolic Acid & fumigation on the house. These are not reliable, especially the former, generally because it is not used strong enough or given long enough to act. The infection of Scarlet fever is especially hard to deal with as it will remain still potent for ill in clothes or such like for years. The only satisfactory way of dealing with it is by steam. The interest on the purchase money of a portable steam disinfecter would be less than the maintenance of a case of Fever at The Sanatorium. The working expenses would not be great. It would be of special service in the case of an outbreak of Small Pox, as in the case of this very serious disease it is not usual to trust to Chemical Disinfection, but the infected articles are destroyed. This means compensation. These remarks are introduced ~~as~~ in consequence of the New Vaccination Act there is a great liability of epidemics of this disease. I am glad to say that there are not many of the Conscientious Class in this district. That a person should be allowed to have an objection on a matter of which he can know nothing & in consequence be a standing menace to the safety of others is a new departure in legislation which it is to be hoped will not be allowed to exist for long.

#### SANATORIUM.

The arrangement with the city of Exeter has worked well during the past year. A special officer has been appointed to carry out removals. This has been found to effect a considerable saving of time as cases are generally removed on the same day on which the certificate is received. 15 cases were removed 2 more would have been if the distance had not been too great for them to travel in the state in which they were.

*Travel in the state in which they were.*







## SANITARY WORK IN THE DISTRICT.

Under §15 of the Public Health Act the following work has been done to the sewers in the district. The Alphington Sewer has been extended so as to connect the higher parts of the village with the lower. The disposal of the sewage has caused trouble but is now being dealt with by irrigation until a permanent scheme is devised. The opinion of an outside expert is to be taken. In my opinion the present system of irrigation will suffice if it be properly looked after. If this cannot be done it should be some method of treating it by Bacterial Methods should be adopted. It may be said that this is still in the experimental stage, but it is only the natural method brought under control. The ultimate disposal of sewage depends always on the action of Bacteria & on nothing else. It is they who purify it when it passes over land. A cubic inch of soil contains millions of these scavengers, ready to devour any organic matter which may be brought to them. Any chemical method is absolutely out of place here, as the chemical treatment is only capable of separating the solids of the sewage & the purification of the matter in solution has to be effected by passage over land. A chemical method is also very expensive.

Considerable work has been done to the sewers at Topsham. The Ropewalk Fore St., & Monmouth Hill sewers were found to be very defective and have been completely renewed. Most of the connections were also found to be defective & these were made good. The Poltimore outfall sewer has been extended by about 600 feet. This was necessary owing to nuisance & Pollution of Wells. The Sowton sewer has been extended as it was found to be a nuisance being so near the village. The Playmoor sewer at Pinhoe was found to be defective in the joints & these have all been made good.

### INSPECTIONS.

During the year I have made 263 inspections of houses. Of these 38 were to enquire into outbreaks of Infectious disease. As a result 37 privies were condemned, being replaced by Pail Closets, 18 insufficient drains, 8 premises were in such a state as to be a nuisance, 2 required whitewashing & cleansing, 1 unfit for human habitation, 3 of overcrowding, & 3 of accumulations of refuse.

### WATER.

In my inspections exception was taken to 52 sources of water supply. At Pinhoe there were 21 houses served by 2 wells (Analyses Nos. 2 & 3). The Nitrates had doubled since an analysis done last year. The wells were condemned & the water from the city of Exeter mains were laid on to the houses. 25 were rendered free from surface pollution. 6 were at Topsham. My attention was first drawn to the water supply here by the analysis of the water used by a house where there was a case of Enteric Fever. This I condemned. I also gave the opinion that a better water would not be obtained there. The well was ordered to be cleaned out but a fresh analysis showed the water worse than before. Then I received a complaint as to the water in some other wells & 2 of them were analysed with another at my recommendation. (Nos. 16, 21 & 25). These were all condemned. A fresh analysis was made in 2 of these & they were again condemned. 2 more were analysed in connection with cases of Enteric Fever (Nos. 23 & 24) & these were also found to be unfit for use. Then 8 samples were ordered to be taken & submitted to the County Analyst. The result was that He condemned the whole in very strong terms. The matter rests here, the majority of the Council being of opinion that in view of the low Zymotic Death rate during the last 10 years it was not worth the expense of bringing in a supply from outside. Also that the bed of sandstone on which Topsham rests was a most efficient natural filter. The answer to the latter is that even the best of filters, natural or otherwise will become foul in time. That the filtration is not satisfactory is shown by the bacteriological examination of the water. I would also point out that what has been in the past has no relation to what may occur, especially so in matters of this kind. It is evident that the Bacillus of Enteric Fever has established a home in the soil of Topsham & here it will stay for some time. It has an ever present way of infecting the persons who use the water. & as long as the present supply

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1. The first part of the document is a list of names and titles, including "The Hon. Mr. Justice" and "The Hon. Mr. Justice".

There is a possibility that the information was obtained from a source who is not reliable. It is not possible to determine the reliability of the source at this time. The information was obtained from a source who is not reliable. It is not possible to determine the reliability of the source at this time.



is in use so long will there be cases of Enteric Fever. With a fresh supply & with all the drains made good Topsham should be entirely free from this disease. The well at Woodbury is a new one & has steadily improved in purity since it was sunk. (Nos. 5, 6, & 7) It would be advisable that an analysis should shortly be made to see whether the improvement is maintained. The well at Faringdon was close to a leaking drain, which has been attended to (No. 11). The well at Clyst S. Lawrence (No. 12) was close to an exceedingly foul ditch. This was ordered to be closed. The cause of the pollution was also attended to. The well at Exminster was a new one (No. 13). All the wells except that at Rewe are in sandstone, this accounts for the high amount of Chlorine. That at Rewe is in river gravel. The public wells at Lymington have been rendered free from surface pollution, also at Clyst S. Lawrence. I have inspected the source of Public Supply at Starcross & find it satisfactory. The filter bed of the Dunsford supply was renewed in the summer. A new cover was found to be necessary at the Bridford reservoir & this with some minor defects is being attended to. In my inspections I found 4 houses that had been occupied without a water certificate.

#### OFFENSIVE TRADES.

The premises of one gut cleaner were inspected & found satisfactory.

#### BAKEHOUSES & SLAUGHTER HOUSES.

8 bakehouses & 6 slaughter houses were inspected & with the exception of one of the latter, where the drainage of some cowsheds ran into it, they were all satisfactory.

#### DAIRIES, COWSHEDS & MILKSHOPS ORDERS

19 OF THESE HAVE BEEN VISITED UNDER THIS ORDER & of these 4 were not registered, 6 had the drainage defective, 2 required limewashing, & in one swine were kept. Some of the cowsheds were very old & difficult to properly light & ventilate.

#### ADOPTIVE ACTS.

The Public Health Amendment Act, as far as it relates to Rural districts is in force, as also the Infectious Diseases Notification Act. The value of the latter which has been in force for 5 years is shown by the fact that the notifications in the successive years have been 229, 209, 122, 93 & 84. I also advise the adoption of the Infectious Disease Prevention Act. This will at no extra expense greatly help us to put down Infectious Disease. It among others allows of the disinfection of infected premises by an official of the Council & the recovery of the expense from the owner. I am strongly of opinion that such an important matter should be left to the hands of any one but a skilled person. It is generally inefficiently done & leads to a false sense of security.

#### FOOD & DRUGS ACT.

No use is made of this important Act. Power should be given to take a limited number of samples every month and submit them to analysis.

#### HOUSES OF THE WORKING CLASSES ACT.

Provision of more houses is in my opinion the one of the most important wants of the district. There are a large number of ill lighted, damp & badly ventilated houses in the district. These certainly would not find tenants if there were other houses for them to occupy. If they were condemned it would only lead to depopulation of the place as there are no others for them to occupy. Any new house that is built is immediately occupied but these are very few in number.



1. The first thing I noticed when I stepped out of the plane was the fresh air. It felt like a warm blanket after a long flight. The sun was shining brightly, and the birds were chirping happily. I took a deep breath and felt a sense of relief.

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1400	1400	1400	1400	1400	1400	1400	1400
1500	1500	1500	1500	1500	1500	1500	1500
1600	1600	1600	1600	1600	1600	1600	1600
1700	1700	1700	1700	1700	1700	1700	1700
1800	1800	1800	1800	1800	1800	1800	1800
1900	1900	1900	1900	1900	1900	1900	1900
2000	2000	2000	2000	2000	2000	2000	2000
2100	2100	2100	2100	2100	2100	2100	2100
2200	2200	2200	2200	2200	2200	2200	2200
2300	2300	2300	2300	2300	2300	2300	2300
2400	2400	2400	2400	2400	2400	2400	2400
2500	2500	2500	2500	2500	2500	2500	2500
2600	2600	2600	2600	2600	2600	2600	2600
2700	2700	2700	2700	2700	2700	2700	2700
2800	2800	2800	2800	2800	2800	2800	2800
2900	2900	2900	2900	2900	2900	2900	2900
3000	3000	3000	3000	3000	3000	3000	3000
3100	3100	3100	3100	3100	3100	3100	3100
3200	3200	3200	3200	3200	3200	3200	3200
3300	3300	3300	3300	3300	3300	3300	3300
3400	3400	3400	3400	3400	3400	3400	3400
3500	3500	3500	3500	3500	3500	3500	3500
3600	3600	3600	3600	3600	3600	3600	3600
3700	3700	3700	3700	3700	3700	3700	3700
3800	3800	3800	3800	3800	3800	3800	3800
3900	3900	3900	3900	3900	3900	3900	3900
4000	4000	4000	4000	4000	4000	4000	4000
4100	4100	4100	4100	4100	4100	4100	4100
4200	4200	4200	4200	4200	4200	4200	4200
4300	4300	4300	4300	4300	4300	4300	4300
4400	4400	4400	4400	4400	4400	4400	4400
4500	4500	4500	4500	4500	4500	4500	4500
4600	4600	4600	4600	4600	4600	4600	4600
4700	4700	4700	4700	4700	4700	4700	4700
4800	4800	4800	4800	4800	4800	4800	4800
4900	4900	4900	4900	4900	4900	4900	4900
5000	5000	5000	5000	5000	5000	5000	5000

The journey was not without its challenges. There were moments of doubt and uncertainty, but I always found a way to push through. I learned that resilience is a key to success. I also discovered the importance of staying true to my values and goals. The end of the journey was a triumph, and I felt a sense of accomplishment that I had never experienced before.



# ADDENDUM 1

## Table of Water Analyses done during the year.

	Matter in Solution	Loss on Ignition	Chlorine	Free Ammonia	Albumd. Ammonia	Nitrogen as Nitrates	Oxygen absorbed in 2 hours at 100° C.
	parts per 100,000.						
PINHOE.							
1. Bendle.	60	22	4.2	.001	.005	.25	.06
2. Causeway Lane	60	22	6.9	.000	.008	1.46	.03
3. „ „	61	21	6.8	.000	.001	1.33	.1
4. Bellworthy.			4.5	.023	.009	.29	.19
WOODEBURY							
5. Laar.			9.6	.002	.02	1.2	.28
6. „			9.6	.001	.008	.98	.2
7. „	62	6	7.8	.001	.005	.4	.18
8. „	65.2	5.2	8.4	.001	.003	.59	.05
9. Godfrey.	56	12	7.2	.001	.006	.28	.04
10. LIMPSTONE.			6.6	.003	.006	.28	<del>.04</del> .1
11. Farrington.			14.2	.001	.008	1.0	.15
12. CLYST S. LAWRENCE							
Trump.	97	13	20.0	.015	.019	1.15	.29
13. REWE.	14	6	1.8	.000	.001	.11	.08
14. EXMINSTER							
Cotterell.			6.2	.002	.02	.8	.15
15. Ponsford.	39	16	4.8	.013	.0206	2.2	.2
TOPSHAM							
16. Passage.	99	11	16.4	.001	.006	1.032	.12
17. „	107	18	16.8	.001	.008	1.3	.19
18. Tree's Ct.			14.4	.006	.008	.93	.12
19. „ „	131	21	12.4	.000	.01	1.505	.21
20. Outay.	73	11	7.0	.002	.015	2.52	.2
21. Agg.	115	31	9.2	.007	.017	1.149	.27
22. „	91	31	8.1	.001	.004	4.199	.26
Underhill's							
Court.	115	24	12.4	.003	.018	2.1	.22
24. Passage court	87	22	8.1	.002	.013	3.64	.15
25. McMurdo.	188	55	18.6	.003	.009	.8	.2
26.	113	39	13.7	.005	.034	7.5	.36
27.	89	23	12.4	.005	.006	5.02	.31
28.	133	26	15.6	.002	.009	3.03	.46
29.	130.3	30	15.0	.001	.006	3.03	.41
30.	91.5	40	7.6	.006	.912	3.06	.37
31.	140	30	13.1	.000	.008	7.3	.309
32.	48.5	31.6	6.5	.002	.008	1.4	.314
33.	112.5	33	9.4	.002	.012	4.8	.412

### BACTERIOLOGICAL ANALYSIS.

A sample from well No. 22 gave 1500 organisms per c.c. Proteus varieties were present in considerable numbers. No E. Coli. (Dr. Blaxall) Samples 26 to 33 were analysed by Mr. Wynter Elyth. These contained between 133 & 262 per c.c. Number of organisms growing on Phenol Gelatin between 176 to 640. E. Coli found in 26 to 31 inclusive. Aerobic spore bearing organisms 40 to 83 per 10 c.c. Liquefying organisms from 10 to 112 per c.c. B. Enteritidis Sporogenes not isolated. Analysis No. 8 was by Dr. Dyer & supplied by Mr. Chamier. This contained 50 organisms per c.c.



1875

1875

1875

1875

1875

1875



ADDENDUM 2.  
SUMMARY OF WORK DONE BY THE INSPELTOR OF NUISANCES.

No. of complaints received during the year	45
Number of inspections of houses,pramises,etc.	928
,, ,,re-inspections	488
Orders issued	334
Houses cleansed & whitewashed	35
Houses disinfectd after notice	30
House drains repaired,trapped, ventilated,etc.	138
W.C.s provided.	4
,, provided with water	27
Midden or Pit privies converter into Pail closets	84
New pail closets provided.	32
WATER.	
New supplies provided.	33
Wells rendered free from surface pollution.	33
Water certificates granted.	18
Recovals of accumulations of dung, refuse,etc.	30
Bakehouses inspected.	28
Dairies & Cowsheds ,,	62
Slaughter houses ,,	35
Overcrowding.	5
Summon ses issued.	2

*I deduce servant*

*Mark Zana Jun*

*L RCP. MRCS, FRCP. H. Member San. Auth.*

*Feb 17, 1897.*







NAMES OF LOCALITIES adopted for the purpose of these Statistics; public institutions being shown as separate localities. (See note 4 on back of sheet.) (Columns for Population and Births are in Table B.)	MORTALITY FROM ALL CAUSES, AT SUBJOINED AGES.							MORTALITY FROM SUBJOINED CAUSES, DISTINGUISHING DEATHS OF CHILDREN UNDER FIVE YEARS OF AGE.																												
	At all ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.																TOTAL.													
								(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	1	2	3	4	FEVERS.			10	11	12	13	14	15	16	17	18	19	20	21	
																	Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup.	Typhus.	Enteric or Typhoid.		Continued	Relapsing	Puerperal	Cholera.	Erysipelas.	Measles.	Whooping Cough.	Diarrhoea and Dysentery.	Rheumatic Fever.	Phthisis.	Bronchitis, Pneumonia and Pleurisy.	Heart Disease.	*
Clyer	104	14	5	2	3	29	48	Under 5 5 upwds.			1							2					1	2	1		5	4	15	7	10	4	14	38	22	
Ez	119	21	11	3	2	33	49	Under 5 5 upwds.			1											6	4	4		8	17	3	9	6	3	43	87			
Olka	55	10	5	3	4	13	20	Under 5 5 upwds.														1	1	1		7	3	3	4	2	2	13	15			
Tequi	53	15	8	2	1	10	14	Under 5 5 upwds.														10	3			3	2	7	1	1	12	23				
Topokau	36	3	2			10	21	Under 5 5 upwds.																		1	3	5	3	5	14	5				
Sauakomun	3			2	1			Under 5 5 upwds.						3																		3				
Asyken	54					39	15	Under 5 5 upwds.																		9	4	8			32	54				
Iduor "	1			1				Under 5 5 upwds.																							1	1				
TOTALS	425	66	31	13	11	134	140	Under 5 5 upwds.			1			3		2		1		18	10	1	33	48	39	24	15		579	94						

The subjoined numbers have also to be taken into account in judging of the above records of mortality. See Note 5 on back.

Deaths occurring outside the district among persons belonging thereto.	27	1	1	2	2	10	11	Under 5 5 upwds.																							1	2
Deaths occurring within the district among persons not belonging thereto.	61			3	1	42	15	Under 5 5 upwds.						3																	20	25

\* The heading of column 19 is left blank for the insertion of Influenza, or any other disease which it may be thought desirable to record.



# NOTES ON TABLES A AND B.

- NOTE 1. *Medical Officers of Health of "Combined Districts" must make a separate Return for the District of each District Council.*
2. *Medical Officers of Health acting for a portion only of the District of a District Council should write, in the heading of the Table, the designation of the Division for which they act.*
3. *The words "Urban," "Rural," or "Metropolitan" must be inserted in the appropriate space in the heading, according as the District is Urban or Rural, or is within the Metropolitan Area.*
4. *The "Localities" adopted for the purpose of these statistics should be areas of known population; such as parishes, groups of parishes, townships or wards.*

As stated at the head of the first column in each Table, *Public Institutions* should be regarded as separate localities, and the deaths in them should be separately recorded. Workhouses, Hospitals, Infirmarys, Asylums, and other establishments into which numbers of people, and especially of sick people, are received are Public Institutions for the purpose of these statistics.

5. *The deaths which have to be classified in this Table (A), and summed up in the horizontal line of "Totals," are the whole of those registered as having actually occurred in the several localities comprised within the Division or District. But the registered number of deaths frequently requires correction before it can give an exact view of the mortality of a Division or District; and the two lowest horizontal lines are provided for the purpose of enabling Medical Officers of Health to indicate, to the best of their ability, what the extent of such corrections should be. Details concerning the corrective figures, e.g., the institutions that have been considered, or the particular localities to which corrections apply, may appear in the text of the report or in supplementary tables.*

Area and Population of the District or Division to which this Return relates.	
Area in Acres	107,640
Population (Last Census)	27,260
" (Estimated to middle of 1897)	26,940
Death Rates.	General 14.5 { per 1,000 Population, estimated to middle of 1897.
	Infant (under one year of age) 118.2 { per 1,000 Births Registered.

In recording the facts under the various headings of Tables A and B, attention has been given to the notes endorsed on the Tables.

*Mark Faran* Medical Officer of Health.

(Date) *Jan*, 1898.



(B)

TABLE OF POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS, coming to the knowledge of the Medical Officer of Health, during the year 1898, in the St Thomas District; classified according to DISEASES, AGES and LOCALITIES.

NAMES OF LOCALITIES adopted for the purpose of these Statistics; Public Institutions being shown as separate localities. (See Note 2 on back of sheet.)	POPULATION AT ALL AGES.			Registered Births.	Aged under 5 or over 5.	NEW CASES OF SICKNESS IN EACH LOCALITY, COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER OF HEALTH.													NUMBER OF SUCH CASES REMOVED FROM THEIR HOMES IN THE SEVERAL LOCALITIES FOR TREATMENT IN ISOLATION HOSPITAL.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
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						1	2	3	4	Typhus.			FEBERS.						10	11	12	13	1	2	3	4	Typhus.			FEBERS.						10	11	12	13																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
(a.)	(b.)	(c.)	(d.)	(e.)	Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup.	Enteric or Typhoid.	Continued	Relapsing	Puerperal	Cholera.	Erysipelas.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						</

State here whether "Notification of Infectious Disease" is compulsory in the District yes. Since when? Aug 1893. Besides the above-mentioned Diseases, insert in the columns with blank headings the names of any that are notifiable in the District, and fill the columns accordingly. State here the name of the Isolation Hospital used by the sick of the District. Mark (H) the Locality in which such Hospital is situated; and if not within the District, state where it is situated City of Exeter, St Bartholomew.



## NOTES ON TABLE **B.**

(See also Notes on back of Table A.)

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NOTE 1. The present *Table B.* is concerned with population, births, and sickness (not with mortality) in the district or division to which the Table relates.

2. As stated in the heading of Col. (a), *Public Institutions* should be regarded as separate localities, and the new cases of sickness in them should be separately recorded. Workhouses, Hospitals, Infirmarys, Asylums, and other establishments into which numbers of people, and especially of sick people, are received, are Public Institutions for the purpose of these statistics.

3. *Comments on any unequal incidence of notifiable disease upon the several localities, and considerations as to the local incidence of Consumption and other prevalent diseases, should be made in the text of the Report.*